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## CASES IN PRIVATE PRACTICE.

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[Communicated for the Boston Medical and Surgical Journal.]

**I. Case of Apoplexy, with fatal termination, from the injudicious administration of Fahlenstock's Vermifuge.**—Miss ——, æt. 9 years and 11 months, a beautiful child, of sanguine temperament, had always enjoyed perfectly good health. From appearances manifested for some days prior to her being subjected to the remedy, it was conceived that she was suffering from worms; she had, during the last summer, taken the same medicine under similar circumstances, with apparently good effect. Two bottles of the vermicide had been administered in divided portions daily, for four days, she had been kept from animal food, and had taken no other medicines.

On Saturday, the 20th of June, she exhibited something peculiar in her manner, not distinctly comprehending, as it would seem, what was said to her, and mistaking one thing for another; but from the natural liveliness and playfulness of her character, this was not calculated to attract any particular notice.

At 5 o'clock, on the morning of Sunday, the 21st, her mother was aroused by her nurse informing her that Miss —— was in great pain, screaming from its severity. The pain was complained of in the stomach, and from her having been kept on low diet, while she was taking the vermicide, some wine was given to her with apparent relief. She almost immediately afterwards, however, fell into a state of stupor, which so much alarmed her parents, that they sent for a physician in the neighborhood. This gentleman, although not in civil practice, promptly and most kindly attended, and having learnt the history of the case, ordered sinapisms to be applied to the legs, stimulating frictions to the vertebral column, and an enema to be administered. He then took his leave, recommending the parents to send for their ordinary medical attendant, and offered, as his opinion, that the little patient would in all probability, in the course of a few hours, awake from her then lethargic state, as the effects of the remedy would, it was likely, by that time be exhausted. About noon she had so far recovered, apparently, from her state of insensibility, that she recognized her mother and father, embraced them, and

even masticated a morsel of bread that had been put into her mouth. She soon relapsed into the same comatose state in which she had been in the morning. I was sent for at half past 1, P. M. On entering her room, I found her in bed in a state of complete coma; no stertorous breathing, but occasionally a deep sigh; the pupils much dilated, with now and then very slight convulsive movements of the fingers; skin natural; no heat of head; features calm; face pale; occasional borborygmus; bowels confined; pulse 120, weak and fluctuating. I ordered fresh sinapisms to the feet and legs, and a long one from the nape of the neck to the last dorsal vertebra; hot fomentations to the chest and over the epigastrium, and bottles of hot water between her knees; burnt brandy was administered every ten minutes by the mouth, and an enema of castor oil and spt. turpentine was thrown into the intestines.

Feeling fully sensible of the perilous position of my little patient, I requested a consultation. Dr. Crawford met me. In addition to the counter-irritation already made, a mustard poultice was applied to the epigastrium, and a mixture of spt. ether sulph. and spt. ammon. aromat. given internally, alternately with the brandy. The enema was repeated.

She continued in much the same state until about 8, P. M., when feeling a slight sensation of heat in the head, the pupils apparently disposed in the least degree to contract, the bowels having once been moved and urine passed, I was led to fancy that re-action might set in, and as her residence was at some distance from the city, wishing to be prepared I sent off for a dozen leeches, which, from re-action having commenced by the time they were brought, I immediately applied, assisted by Dr. Crawford, to the temples. The blood abstracted by the leeches and subsequent hot fomentations, was considerable in quantity; pounded ice was now applied to the top of the head, a blister to the nape of the neck, five drops of croton oil diffused over the tongue and fauces, and another enema, the same as before, but containing several drops of croton oil, thrown up into the intestines. The convulsive movements noticed in the fingers, during the early part of the day, had become increased in force, attacking the muscles of the face, neck, back and extremities, and at about 4, P. M., were so severe, that ice cold water was poured upon the head from a height of about four feet, but without any benefit. After the leeching, they became less frequent in their paroxysms, and were most strikingly noticed in the muscles of the neck and back. The only result of the latter part of the treatment in this case, was the return of the features, which, with the setting in of re-action, had become puffed and purple, to a perfectly natural hue, and the breaking out over the surface of a general perspiration.

Miss \_\_\_\_\_ died at 4, A. M., on Monday, the 22d of June. No *post-mortem* examination could be obtained.

The inferences deducible from the above are, in my opinion, the following:—

1. That this preparation, of the nature of which so little is known, must be ranked among the class of narcotico-acrid poisons, producing

its effect primarily upon the stomach and small intestines, and secondarily through the ganglionic system upon the entire cerebro-spinal axis.

2. That its effects from accumulation must be guarded against in the same manner as those of digitalis, &c.

3. That oleaginous purgatives should be combined with it, and that the absorbent system should not be excited by a system of low diet being enforced during the time of its administration.

4. That the manner in which death occurred in this case, was clearly that, which would be referable to Bichat's "death commencing at the head."

II. *Case of Pregnancy, unaccompanied by any of the ordinary signs of this state, in a woman already the mother of three children.*—Mrs. Franklin, wt. 25, of middle stature, a nervous temperament, the mother of three children, had always enjoyed good health prior to her marriage, five years ago. Had had natural labors with all her children. On the occasion of her last confinement, the midwife who attended her was under the necessity of removing the placenta in consequence of adhesions. For some time after this labor, she suffered a good deal from pains in the thighs and legs, and remarked that the lochial discharge was not so abundant as on previous occasions. Her youngest child is now (the 21st May) nearly ten months old, and has been weaned nearly six weeks.

Just about the time of weaning her child, she was seized with a bloody discharge from the vagina, which continued for two days and nights, then ceased; at the expiration of a week it returned, lasting for the same length of time. These discharges have returned with regularity ever since at similar intervals, and lasted the same period. When called in to see her, I found her in a pool of blood which had issued from the uterus. I prescribed for her two scruple doses of the diacetate of lead with a little vinegar. There was a tumor of a fig shape, flattened in front, extending from the symphysis of the pubis to the middle space between the navel and the ensiform cartilage. The hand could be easily passed behind the cornua of the tumor and its base. Had had none of the usual signs of pregnancy; the mamillæ were particularly flaccid; the areolæ pale and without the appearance of surrounding papillæ or congested cutaneous veins. No placental bruit could be heard either immediately or meditately. The os tincæ was natural, as a matter of course retracted upwards and backwards. Had taken acid medicines and castor oil. A dose of the latter she had taken in the morning.

22d.—Had some discharge during the night, but much less than usual; has more the appearance of menstrual and other blood mixed, than ordinary blood. Complains of weakness; pain at the top of the head. The bowels have not been affected by the castor oil taken yesterday. I ordered an enema to be administered. At my second visit, found the midwife, who had been sent for to carry out my instructions, and who expressed to me her conviction that there had been a miscarriage some weeks since; that she had at that time been sent for, and was perfectly satisfied that such was the case. She (the midwife) was a person of

great experience, and practice, and, moreover, a sensible woman. Therefore, I admit, that I was influenced by her report. I plugged the vagina with pounded ice, and applied cold cloths to the vulva and a general bandage.

There was much less discharge on the next day, pain in the back induced only by considerable direct pressure on the tumor, or when the mass is moved from side to side. I conceived either that the tumor was caused by a collection and retention of blood oozing from an abraded surface on the interior of the womb, or that there was a quantity of menstrual blood which could only partially escape through the cervix and os uteri. The bandage round the pelvis was adopted, and a mixture of the supersulphate of magnesia in infusion of quassia was ordered.

From this state, the tumor gradually diminished, although with continued moderate discharge until the 28th, when I suggested to her husband, the propriety, in the early part of the ensuing week, of taking her to the country. The very next day he took her by steamboat to a small watering place a few leagues from the river, with her two children. She took off, before starting, and left behind her, her bandage. She was a good deal fatigued with attending to her children, and the journey. She felt the tumor increase suddenly, had another discharge of blood, and returned forthwith to town. I did not, however, see her again until the afternoon of the 8th June, when she called at my house, distant from her own residence nearly a mile. She had all the appearance of a woman in the seventh month of pregnancy. I sent her home, and called upon her the next day. Found her in bed, made a minute examination, and requested a consultation. Drs. Arnoldi and Crawford (the former my colleague, and Professor of Obstetrics in the School of Medicine) met me at 3, P. M. Dr. Crawford and myself were of opinion that the tumor was attributable to retained blood. Dr. Arnoldi thought that he could distinguish a solid body in the cavity of the womb. The stethoscope was again used by us all, with the same results as when I employed it early in the case. Although there was a slight difference of opinion as to the nature of the tumor, we were perfectly unanimous in our treatment, that ergot should be administered, and should that not suffice to cause contraction of the womb and the expulsion of its contents, a bougie should then be introduced. I prescribed for her three powders containing  $\text{D} \text{ ij.}$  of fresh and very excellent ergot, combined with the same quantity of sub. borat. sodæ. She took them in the course of the next forenoon. Each dose caused nausea and vomiting, but not for a considerable time after it had been swallowed. She did not suffer from the usual pain elicited by the remedy, and passed a tolerably easy night, sleeping a good deal. The next morning, as agreed upon in consultation, I proceeded to introduce a large-sized flexible metallic bougie, but immediately on passing the cervix uteri, a sensation being communicated to my hand, of the extremity of the instrument striking against a solid body, I desisted forcing it on any farther. There was no discharge of blood from this operation. Designing to return the following day with Dr. Arnoldi, and to renew the operation if required, I stated my intention to her hus-

band. He begged of me to allow him to fetch Dr. A. at once. After a good of arguing with him, I at length yielded, and waited his return with my friend. I related to him what I had felt; he took the bougie and introduced it to its full length. This operation induced no great pain. We prepared her, however, for them. Ordered for her a dose of castor oil and spt. turpentine, and an anodyne if required. She took the former in the course of the evening, but from having no pains did not require the other. The succeeding day, she complained to me of severe pain in her back and belly, accompanied by a good deal of forcing. In the course of the day, she passed clots of blood to the extent of nearly two quarts. The pains became aggravated towards night. Saw her again at 8, P. M. Had passed more clots; was in violent pain, like that of labor. I gave her the anodyne draught.

I had scarcely reached my own house, when another messenger came to me, stating that my patient was bleeding to death, and that my attendance was urgently required. I met on the way, and took up with me, my friend Dr. Arnoldi; armed with sugar of lead, ergot and opium, we entered the room. We found the woman lying on her back, pale, but perfectly composed and calm. A woman on the bed beside her, accosted us by expressing the fright which she had herself had, "for the child was born." The poor woman's fear had not been greater than was our surprise, inwardly felt and talismanically communicated to each other. The child was born, but the placenta was not yet detached. The removal of this occupied only a few minutes. The fetus was a male of about eighteen weeks. From its external appearance it had been dead several days. The patient had slight after-pains, but went on perfectly well up to the time when my attendance ceased.

Is the above case to be looked upon as a case of partial placenta previa? Or is it to be attributed to an oozing and gradual deposition, with coagulation of blood between the inner surface of the uterus and a portion more or less considerable of the decidua reflexa? One valuable lesson is to be learned from it, at all events—never to offer in positive terms a diagnosis, where there is any complication.

Montreal, July 14th, 1846.

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#### APPLICATION OF THE TREPHINE FOR A NEURALGIC AFFECTION OF THE CRANIUM.

To the Editor of the Boston Medical and Surgical Journal.

SIR.—In the first No. of the New York Journal of Medicine and Surgery, of July, 1838, there is a case published by myself, detailing the facts connected with the removal of part of the tenth rib for a neuralgic affection of the intercostal nerve, consequent on a violent contusion of the bone. It is unnecessary to detail the nature of the accident or the steps of that operation. There was at the time an entire dissent to it of all the gentlemen who were consulted in the case, and it was only performed at the urgent solicitation of the patient, who had tried every imaginable

means for relief, including tonics, cupping, blistering, &c. &c., suggested by our best surgeons, including those of the New York Hospital. She was declining rapidly from constant loss of sleep, and innervation produced by the excessive use of morphine. The operation was completely successful, the pleura remaining uninjured; it produced instant relief, and the patient (a female) rapidly recovered her health and spirits, gaining twenty-three pounds of flesh within two months after the operation. She is now perfectly well, though it was performed eight years since. This case is well known to many gentlemen in this city—Dr. S. P. White and several others being present. The diagnosis is important, and as its evident verification by the result, influenced me in the performance of the operation I am about to detail, I will briefly state it. The rib, as it proved upon examination of the piece removed, had not been fractured, though a small bony projection of the size of about half a pigeon's egg, as it appeared under the skin, it was supposed indicated either a fracture, enlargement of the bone, or a periosteal growth. This was not important, however, to the diagnosis; which was, "pressure upon the intercostal nerve by the enlargement," producing the violent pain constantly experienced in the epigastric region; that portion of the abdomen being supplied with nerves from the parallel intercostals, and the fact being well known, that pain extends from an irritated nerve to its distribution.

June 18th, 1846.—Mrs. Bishop, of Easton, Pa., the widow of a deceased clergyman of that place, a lady of 50 years, and of a highly intellectual character and remarkable self-possession, about seventeen years since received a blow from the falling of a window sash upon the upper and posterior angle of the left parietal bone. There was neither a wound nor suppuration consequent upon the injury, and it excited no further attention after the application of some simples to the bruised part, until a few weeks afterwards, when it became the seat of the most exquisite and constant pain. This observed no regularity in its accessions; it steadily increased, until it became so intolerable that she was obliged to resort to morphine, and eventually to sulphuric ether, both of which articles she eventually used in enormous quantities, though greatly opposed to all stimuli from previous education and habits of thought. Even when under their influence her mind was clear and unclouded; and she had occupied the long period of her affliction with the religious and polite literature of the day. Some idea may be formed of her state of mind, by the information that she was well acquainted with the manner of the operation and the diagnosis of her disease, at the period of my visit. Mrs. B. had requested my opinion some two years since; at that time there were no symptoms of epilepsy, however slight; neither had there been at any time the least loss of consciousness or disposition to fall. I proposed at that time a circular incision to the bone; and if that did not benefit, a caustic issue over the part. The operation of trephining was proposed as a last resort. This was not done. About a year before my last visit, Dr. Gross, of Louisville, an intimate friend of hers, and the accomplished author of the *Pathological Anatomy*, examined her

case whilst on a visit to Easton, and under the desperate circumstances acceded to her desire to submit to the trephine. She requested me to perform it, and I visited her for that purpose on the 18th of June last.

At this period there was occasionally slight loss of consciousness for a few moments, particularly when the circulation was hurried; still no symptoms of epilepsy. This symptom influenced me to perform the operation. The amount of morphine and ether consumed within the previous six months was almost incredible. The testimony of her son (the purchaser) and Dr. Sloan, of Easton, will authenticate the statement, which is indeed highly important in a medical point of view. The amount, as stated to me, was "from one to two drachms of morphine per week, and one hundred and twenty-six pounds of ether during the six months"! This enormous quantity, so perfectly accustomed to it had the system become, did not even exhilarate the patient, or for one moment cause her to lose her equilibrium. Her deportment was characterized by the utmost quiet, and that perfect calmness and self-possession characteristic of the well-bred woman. Even during the operation, when she had taken an unusual quantity, her conduct was quiet and natural. There was nothing peculiar or difficult in the operation; it was performed in the presence of Dr. Cooper, Dr. Sloan (the attending physician), and Dr. Inness, all of Easton. The patient placed her finger upon the spot; and after being engaged in conversation, was again requested to indicate it. She invariably recurred to the same spot. This precaution was necessary, for we had no other guide; not even the slightest elevation or eschar marked the seat of the injury. On removing the bone, the cause of the affection came to light; there was a considerable exostosis on the inner side, amounting to rather more than an eighth of an inch from the plane of the inner surface of the cranium. This, notwithstanding its comparative smallness, had been the growth of seventeen years. Immediately upon raising the bone, the patient's brow became elevated, and she declared "she felt free and had more room." All the unpleasant symptoms have vanished, and the patient is gradually discontinuing her morphine, which, although she has not the least vestige of pain, could not wisely be at once discontinued. She does not now take one quarter the former quantity.

I hope the following remarks, appended to the case first stated, will not be thought irrelevant; they may serve to explain the motive for the performance of an analogous operation, which, but for the result, might have been thought imprudent. I conceive them to apply equally to this case; your readers will decide. "Should this operation be thought unwarrantable, I can only say I know of no other means of relief, and that the patient importuned me for months to perform it, after having been told by many surgeons of eminence, as well as by myself in their presence, that it might prove fatal. She uniformly answered that death was preferable to the life she endured. It is highly important that the extent and danger of operations that may conscientiously be performed for neuralgia should be determined, as the strongest constitution will in time yield to its undermining influence." E. H. DIXON.

New York, August, 1846.

**MEDICAL INSTITUTIONS AT ROME.**

From Prof. F. H. Hamilton's "Notes of an European Tour."

We are now at length in the "eternal city," where I shall remain until "time" presses me again on the way.

In 1838 the population of Rome was 148,903, of which nearly 5000 were Ecclesiastics and 4000 Jews. There are eight principal hospitals, which together can accommodate about 4000 patients. There are also 18 societies for endowing young girls who are willing to marry ! and such also as will dispose of themselves by taking the veil ! One would almost believe that at Rome the girl market was overstocked, and that these means were necessary to remove the excess. If so, His Holiness might open a very profitable commerce with Texas. About \$32,000 per year are said to be distributed in this way, and more than a million of dollars are annually expended by the various charities, including the sums which are sent by public authority to the houses of the poor, not less than 300,000 of which comes from the treasury of the Pope. In addition to all this, large amounts of both money and provisions are daily distributed from the doors of convents within the city. Thus with a population less than half of that in the city of New York, the amount of charities yearly bestowed is probably ten times as great; yet the number of beggars and lepers which crawl through the streets from morning to night is equal to that of any city in Europe. I have said that the number of Ecclesiastics in the Holy City was, in 1838, nearly 5000. I may add that the number of foundlings received annually in the various Foundling Hospitals, is about 3000.

La Consolazione, in the rear of the Capitol and under the Tarpeian rock, I visited in company with Mr. Brown, the celebrated American sculptor. It is called the principal Surgical Hospital, and is generally pretty well supplied with punctured wounds; we saw none, however, under treatment, and indeed it contained scarcely any cases of interest. The straight splints with straw junks were applied to four or five cases of fractured legs. One poor fellow had a fractured skull, which was dressed without shaving the hair, or any other particular regard to cleanliness. Upon one of the beds sat a boy with a scrofulous knee, and one of the finest Roman heads and faces I have ever seen—resembling, I remarked to Mr. Brown, the beautiful antique bust of Young Augustus in the Vatican. Mr. B., who is an enthusiast in his profession, persuaded him to visit his studio as soon as he was able, that he might copy his head. The present number of patients in La Consolazione is about 150; all, or nearly all, of whom are placed in one long salle. The situation of this Hospital is near the Forum, in the valley between the Capitoline and Palatine Hills, once a marsh, but now within the thronged portion of the modern city; it is therefore not favorably situated for air or cleanliness.

On the way to the Fever Hospital or the Hospital S. Giovanni, we passed through the Forum; and among the numerous temples, palaces, triumphal arches, the amphitheatre, and other colossal ruins which distinguish this portion of the ancient city, one humble spot more than all others will remain forever sacred in my memory; and to this spot alone

did my feet repeatedly turn, as more than once I attempted to follow my guide and interest myself in the more stately ruins about me. You may smile at my peculiar romance, but if ever you visit Rome, go along the Forum to where stands upon the Via Sacra the ruins of the celebrated Temple of Concord. Close by, in the days of Commodus, stood the drug shop of old Galen, for so he tells us himself. You will not see his sign, nor the illuminated colored bottles at the windows, for the shop was destroyed in a great conflagration, at the same time with the temple, but if you remember well the life of this excellent father and skilful physician, you will turn to mark the place, and perhaps linger thereabouts for a while musing, and thinking possibly the old man will come to look after his broken bottles, and his plasters and ointments, which he prized so highly. For to judge from the amount of broken walls and loose stones lying about, the fire may have occurred but yesterday.

Galen had enjoyed, when he came to Rome in the year 165, the rare privilege of examining a couple of human skeletons at Alexandria, and furnished thus with an extraordinary knowledge of anatomy, he gave public lectures upon the subject to the citizens of Rome. He had thereby attained great celebrity both as a physician and surgeon, when the jealousy of rival physicians procured his banishment from the city, to which he did not return until recalled by Aurelius, after whose death he was made physician to the young and profligate Emperor Commodus. He lived long afterwards to enjoy his restoration to fame and fortune, having died at the advanced age of 70 years.—*Buffalo Med. Jour.*

#### CASES OF VARICOCELE TREATED BY PRESSURE.

[THE following paper was read at a meeting of the Royal Medical and Chirurgical Society, by T. B. Curling, Lecturer on Surgery, &c., London Hospital, and is copied from the *London Lancet*.]

The author states that, three years ago, a case of varicocele, cured by the application of pressure to the spermatic veins, came under his notice, and being struck with the peculiar adaptation of this plan of treatment to counteract the injurious effects of the dilated veins, he determined to give it a trial. He has since treated many cases of varicocele by pressure, and as a sufficient period has now elapsed to enable him to form a just opinion of the value of this plan of treatment, and of its advantages over other methods, he ventures to submit the results of his experience in the management of this complaint to the consideration of the Fellows of this Society.

The author details three cases of varicocele cured by pressure: the first, at the end of nineteen months; the second, at the end of seven months; and the third, a case of double varicocele, in ten months. He also alludes to four other cases, in which this plan of treatment was successful in curing the disease. He remarks, that in these cases the dilatation of the veins had taken place at a comparatively early period of life, was neither excessive nor of long duration, but was productive of incon-

venience and uneasiness, which could be only partially remedied by the suspender; they were precisely the cases in which it was presumed that pressure, by relieving the veins of the superincumbent weight of the blood, would enable their coats to recover their proper size and tone.

Two other cases are related in which great and immediate relief of the distressing symptoms occasionally attendant on varicocele was afforded by pressure, but the patients had not remained under treatment a sufficient period to enable him to judge of the ultimate results.

The author remarks that little attention is paid to constitutional treatment in varicocele, which is commonly regarded as exclusively a local disease. In the class of cases in which the benefit derived from pressure is most apparent, the patients are persons between 18 and 30 years of age, of weak frame and constitution, and subject to dyspepsia, and whose venous system and circulation are feeble. In these cases the operation of local remedies may be aided materially by general treatment.

After noticing the liability of this disease to relapse, and for this reason recommending the continuance of the truss for some time after all symptoms of the affection are removed, the author advert's to another class of cases, in which the application of pressure is capable of giving considerable relief, though not of curing the disease. They are cases met with at a somewhat advanced period of life, in which the plexus of dilated veins is of large size and of long standing, but productive of only slight inconvenience, which may be remedied by the suspender. The application of pressure, however, not only removes the slight uneasiness, but also counteracts the tendency to further dilatation, and prevents the wasting of the testicle, though the enlargement is too great to admit of the vessels being reduced to their former size.

From these observations, the author considers the treatment by pressure to be applicable, either for the cure or relief of the majority of cases of varicocele occurring in practice, and its simplicity, freedom from all risk, and efficacy, in his opinion, render it superior to every other method of treatment that has hitherto been tried. In all the cases which he has treated, he has employed the moc-main-lever truss, which seems better adapted to make the necessary pressure at the abdominal ring than any other instrument that he knows of. In general, the truss need be worn only during the day. When the scrotum is pendulous, or the plexus of dilated veins considerable, he advises the addition of the silk-net suspender.

Mr. Lloyd was always able to relieve varicocele without employing a truss. Dilatation of the veins alone in varicocele did not cause pain or inconvenience, any more than a simple varicose condition of the veins of the leg produced suffering. It was when inflammation came on that the pain and inconvenience were experienced. Allay that inflammation, and you relieve your patient.

Mr. Curling, in answer to a question, said that he had seen one case in which the use of the truss had been discontinued for four months, and there had been no return of the complaint. In answer to Mr. Lloyd, he observed, that the treatment recommended in the paper had reference

only to those cases in which the patient really suffered from the disease. These sufferings might exist independent of inflammation, as the sense of weight, &c., experienced by patients in this disease, and the means taken to prevent it, would testify.

Mr. Solly referred to the case of a hard-working smith, who, after wearing a truss for six months, had been cured.

Mr. Coulson, though he had not employed a truss in his own practice, had known instances in which varicocele had been relieved by such application. When varicocele became troublesome, he was in the habit of drawing the scrotum through Wormald's "scrotal ring," by which means the testicle was drawn up close to the abdominal ring, and this, with a suspender, succeeded in affording relief. The apparatus was removed at night.

Mr. Partridge had seen a gentleman who suffered from varicocele complicated with a hernia, which it was difficult to return, and in whom the scrotum was so painful that he could not bear even the pressure of a suspender. The hernia was so difficult to return, that he was ordered to lay in the recumbent position for six months. The hernia was then reduced; he wore a truss, and the varicocele had since much diminished in size.

Mr. Streeter alluded to the remark of Sir C. Bell, to the effect, that he had known varicocele much relieved, when, having been mistaken for hernia, a truss had been applied to it.

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#### THE NATURAL HISTORY AND TREATMENT OF WOUNDS.

By Isaac Gilchrist, M.D., of Woodside, Aberdeen.

In the case of an external injury, we are invariably met with the demand, what application will heal or cure it? In former days they had sarcotic or flesh-creating ointments, and in our own days we have *healing cerates*, and other similar preparations without number.

Let us first inquire what Nature can accomplish in the matter of wounds; and then, how she may be aided in her operations. Dr. Macartney states, that as to the effects of injury in the different classes of animals, he found, "that the powers of reparation and reproduction are in proportion to the indisposition or incapacity for inflammation, and hence that inflammation is so far from being necessary to the separation of parts, that in proportion as it exists the latter is impeded, retarded, or prevented; and that when inflammation does not exist, the reparative power is equivalent to the original tendency to produce and maintain organic form and structure; that it then becomes a natural function, like the growth of the individual or the reproduction of the species." This is quite different from the doctrines formerly taught under the terms *adhesive*, *suppurative*, *ulcerative inflammations*. There is no countenance here given to Sir Astley Cooper's statement—"No wound can be repaired without inflammation."

Dr. Macartney describes the modes of reparation as follows:—1. Immediate union without any intervening substance, such as blood or lymph.

2. The union by the medium of coagulable lymph, or a clot of blood. 3. The modelling process, or reorganization without any medium of lymph or granulations, the cavity of the wound becoming obliterated by a natural process of growth. 4. The reparation by means of a new, vascular, and organized substance, called granulations. In the treatment of wounds, therefore, the great object of the surgeon must be to prevent inflammation, and thereby secure reparation by any of the first three modes ; if he is successful in this object, granulation and suppuration, which go together, will be obviated. The following simple rules seem to embrace all that is necessary to facilitate nature's operations :—approximate the edges of the wound gently and without much traction (after having cleaned it and removed foreign bodies) ; use as few stitches as possible ; use as little adhesive strap as possible ; apply a pledget of cloth soaked in cold water, and bandage loosely ; inculcate absolute rest ; preserve the part moist and cool, by the assiduous changing of cloths wrung out of cold water, and applied over the bandage ; the part must not be allowed to become heated, so that for the first few days the cloths must be changed every two or three minutes, or a minute continuous stream must be directed on the part, by any of the simple processes recommended for the purpose. By the use of the cold-water dressings, incised wounds heal immediately, and lacerated wounds detach sloughs, and are repaired by the remodelling process without suppuration, at the same time presenting the most excellent cicatrix. In the latter kind of wounds, when poulticing is used, profuse suppuration is established, inflammation being excited by the hot, rancid, oppressive irritating poultices, much of the previously sound tissues are wasted away, and the resulting cicatrix is rigid and puckered, and contracted.

We read that Hippocrates himself used water dressing most successfully, but that afterwards Celsus introduced a variety of absurd and complicated medicines. In the 14th century, the system of secret dressing was in fashion, each practitioner having a remedy which he considered universally applicable. When at a still later period water dressings were used, they were accompanied with incantations, to which the good effects were attributed. It is stated that Ambrose Paré, a pious but superstitious man, used the same application, but astonished at his extraordinary success, deemed the remedy nothing less than miraculous, and therefore not to be used by mortals, and accordingly he abandoned it.

This mode of treating wounds has received at my hands a very extensive trial, and has been followed with great success. I must, however, confess that I have had no inconsiderable difficulty in overcoming the prejudices of the people against so simple a method ; and, in ordinary private practice, it is not unlikely I might have been obliged to discontinue it, or at any rate, substitute the usual more formal perfumed lotions ; but the nature of my appointments in connection with the extensive manufactories in this district, has enabled me to carry forward the simpler practice, and that, too, at least, to the entire satisfaction of the people themselves. Such prejudices are not confined to our locality, and have been, I fear, too much fostered everywhere by the more mysterious pro-

ceedings of the scholastic and orthodox practitioners. If this is so, we need be less astonished at the success of quackery, which is conducted upon similar principles. When we let all our patients see and comprehend that we are treating them upon scientific and simple principles, then may empiricism prepare for its downfall without any interference on the part of government.

I shall conclude with a brief note of a few cases which have occurred recently, in illustration of the foregoing observations.

I. A man received an injury by the machinery in a large paper mill, which laid open the wrist-joint. The hand was half separated from the fore-arm, the tendons were torn, and the inferior end of the radius, which is naturally related to the carpus, was exposed. The arm and hand were placed straight upon a pillow, the wound was cleaned, and two stitches taken ; a pledget of cloth soaked in cold water was applied, and a bandage rolled, not too tightly, round the hand, wrist and fore-arm ; a large basin of cold water was placed conveniently by the bed-side, and directions left to apply freshly-soaked cloths over the bandage every two or three minutes, to prevent any heat or inflammation ensuing. No inflammation took place ; the modelling process was uninterrupted, without suppuration, and an excellent cicatrix formed in little more than a fortnight.

II. A girl had the whole of the soft parts on the palm or surface of the four fingers, as it were, scraped off by the machinery of a flax mill ; the tendons were torn, and the phalanges exposed at different places. Each finger was dressed as follows every day : being first bathed in cold water, a piece of soft cloth was placed round the finger, and a narrow roller to keep it applied ; when the fingers were all thus dressed, a large cloth soaked in cold water was wrapped round them together, and changed as frequently as the slightest tendency to become heated appeared. The modelling process advanced steadily without suppuration, and cicatrization was completed in about four weeks. The fingers gradually acquired flexibility.

A great number of similar accidents have occurred among boys and girls employed in the cotton and flax factories in this district during the last six or seven years ; and the same simple treatment has been adopted, so that, although obliged occasionally to amputate fingers in part or in whole, cases of very remarkable injury of soft parts and bones have recovered, and members have been saved, which, in all likelihood, would have been sacrificed by a treatment less calculated to prevent inflammation and suppuration. Flabby granulations are seldom seen, unless where the prevention of inflammation is carelessly attended to ; so that caustic applications, astringent lotions, and stimulant ointments are not used.

III. A little boy had scrofulous disease of the bones of the ankle-joint, on account of which I amputated, by the flap operation, below the knee. Two stitches were used for two days ; a strip or two of plaster, and cloths wrung out of cold water were the sole applications. The wound was whole in a week. Other amputations have been similarly treated, with equal success.

IV. A girl received a sharp instrument into the ball of the eye, at the

Woodside works. The cornea and sclerotic coat were ruptured, the iris was lacerated, and prolapsus followed. Rest in bed, continued persevering use of cloths wrung out of cold water, and simple laxative medicine, constituted the treatment. The treatment was effectual in preventing inflammation, which was clearly the only indication in the case. The termination was as favorable as could be under such circumstances.

A multitude of cases might be recorded in this place in which the same simple natural treatment, was adopted ; but these instances suffice to show what Nature can accomplish herself, and the little we have to do to facilitate her operations.—*British and Foreign Medical Review.*

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#### ERGOTINE.

THE report of the proceedings of the French Academy of Sciences, in the Presse of the 25th ult. (says a correspondent of the Boston Atlas), contains the following sketch of the communication of M. Bonjeau, a physician of Chambery, who has long been investigating the qualities of the ergot of rye, and who read a paper upon the subject, in which he examined it in three points of view—its natural history, its chemical composition, and its use in medicine. Of the numerous chemical principles, M. Bonjeau dwelt upon two ; the first is a fixed oil, to which he attributes entirely those properties which make the ergot of rye one of the most fearful poisons that exist, and one followed by, perhaps, the most frightful effects ; the second is a watery extract, to which M. Bonjeau has given the name of ergotine, a name also given by others to another principle, but admitted, long since, to have none of the properties peculiar to ergot. The ergotine of M. Bonjeau is shown by his experiments to be exclusively the therapeutical agent of the ergot of rye ; and as it can be obtained entirely free from the poisonous agent of which we have spoken, the day is probably not distant, when it will entirely take the place of ergot in the practice of medicine.

The properties which M. Bonjeau assigns to ergotine are many, but we must refer those who desire to know more in relation to them, to the work in which he has himself recorded his own observations and experiments. They are, moreover, those which the most celebrated writers upon the subject have always attributed to the ergot of rye. There is, however, one property which deserves to be especially mentioned, on account of the pains M. Bonjeau has taken to test its reality. He regards ergotine as of especial value in both internal and external hemorrhages. It is, in a word, a powerful hemostatic. This property of ergot has been already proved by the experiments of M. Muller and Dr. Wright. M. Bonjeau has principally relied, in his experiments, upon animals, as subjects. Unfortunately, they are not proper subjects. The animals upon which we try these experiments are easily healed by their own natural resources ; the most dangerous wounds in them are healed by the most simple applications—such, for instance, as the application of pressure, or merely closing the wounds. It is upon man alone that

experiments can prove anything decisive, because he alone has this unfortunate peculiarity ; all wounds in him are graver, and healed with more difficulty than with any other animal. The following extract from the paper of M. Bonjeau was read at the last session of the Academy.

" On the 5th of the present month (June), about 5 in the evening, a robust woman, about 40 years of age, in uncorking a bottle, which broke in her hands, made a deep wound in the centre of her left hand. A branch of the palmar artery had been opened, and the blood jettied out with violence. It was thrown out to the height even of eight or ten centimetres. The woman was at first much frightened, and did all in her power to stop the blood. Seeing that she could not succeed, she came to the city to consult a surgeon. On her way she had bound her hand tightly with bands of linen, which were bathed in blood when she reached the office of Dr. Molard.

" After alternately compressing the wound, and leaving it to flow, the jet of blood being still as strong as ever, I applied a little lint, soaked in a solution of ergotine, somewhat concentrated, and kept the plug in its place by a slight compression, much less than that which she had employed in vain. At the end of two minutes the blood ceased to flow. Five minutes after I left the plug to itself, and took it out in twelve minutes after its application. The opening of the wound was filled by a clot of blood of considerable firmness. No blood made its appearance afterwards. By way of precaution and to quiet the alarm of the patient, who was pale with fear, we applied a new plug, dipped as before, and kept its place by a bandage, without compression. Two days after the wound was cicatrized ; there was very little accompanying suppuration. A few days after the woman was able to resume her usual occupation."

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**THE BOSTON MEDICAL AND SURGICAL JOURNAL.**

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BOSTON, AUGUST 19, 1846.

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*Sarsaparilla Manufacture.*—People begin to open their eyes to the monstrous impositions practised upon the buyers of sarsaparilla. Those who have read the articles on New York quackery, published some weeks since in this Journal, will recollect that the method of putting up sarsaparilla, and the great aim in view by some of those who have an interest in the establishments where it is prepared, are briefly detailed. A friend called in the other day, with four little cups, containing the products after boiling down a certain quantity of each of the sarsaparillas now in the market. For example, one ounce of a thick, ropy extract, was obtained from one pint of the sarsaparilla from one establishment, having the taste of liquorice paste. Another kind gave four ounces to a pint, which appears to be well charged with sugar. Another gave four and a half ounces to a pint—possessing an equally rich flavor of liquorice and sugar. The Shakers' gave no particular flavor or taste that was like either. They have no secret in the matter. There are always just six pounds of medi-

cial plants to the gallon of their sarsaparilla, viz.: *Phytolacca decandria*; *Rumex obtusifolius*; *Macrotys racemosa*; *Chemaphila umbellata*; *Asclepias incarnata*; *Juniperi communis*, and one ounce of hydrate of potash. The exact composition of Bull's was frankly given to the profession some two or three years since, and perhaps all the others, which was very proper, if the assistance of physicians is of any consequence; but the opinion is advanced that the great demand for sarsaparilla, has led to slighting it—so that some samples have not as much genuine sarsaparilla in them, as a man could carry in his eye.

Without being very conversant with the effects of what is sold for sarsaparilla, one way or the other, it would not be in accordance with the code of honor not to have adverted to these little gally-pots of sweet stuff procured by boiling down the contents of bottles, labelled—*none other genuine, &c.*, leaving the minute analysis to our neighbor Dr. Jackson, the chemist, who can tell us exactly how many pennyweights there are of sarsaparilla, or whether there is any at all. On the whole, we have come to the deliberate conclusion that the less any one takes of any kind the better;—although a solution of liquorice paste in water, is not as dangerous as those panaceas that depend for their efficiency on the presence of arsenic and other metallic poisons.

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*Dr. Burnham's Abdominal Supporter.*—Both the dark age and the golden age have passed away, and we now live in the mechanical—which is no less striking in its influence on the condition of man. Without advertising either to the progress of steam, the cotton gin, the self-regulating mule, power looms, or carpet weaving by automatic machinery, we shall now refer simply to the consideration of mechanical apparatus for preserving health. One of the last is a remarkably ingeniously contrived Abdominal and Spinal Supporter, and is the invention of Walter Burnham, M.D., of Lowell. Feeling the extreme difficulty of making the construction of this instrument intelligible by description, we much prefer inviting medical gentlemen to inspect a model left for the purpose. Mr. Burnett, Tremont Row, who has a vast variety of surgical apparatus, is the agent in Boston, where the very best specimens of Dr. Burnham's supporter may be procured. Its simplicity, beauty of workmanship, adaptation to the parts, and lastly its cheapness, are all points of recommendation, not to be overlooked.

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*Medical Matters in Canada.*—There is no easier method of ascertaining the state of things professional amongst our medical friends in the Canadas, than to peruse a speech of Dr. Wolfred Nelson, of patriotic memory, a member of the Colonial Parliament. It furnishes an insight into the speaker's views of the character and condition of the two medical schools at Montreal. A few short paragraphs of the speech are all we have room for.

“ After what the honorable and learned attorney General East said last year, I did not think that he would this year propose another £500 for the medical faculty of McGill College. But we have the learned gentleman forgetting his pledge, and again making his demand without deigning to state what are the benefits which the country has derived from this extravagant outlay. I state in my place in this House, and I will maintain

every assertion which I make, that the country has received no earthly advantage from this heavy expense. Have the pupils of the McGill School increased since last year? Have the lectures been more numerous or better? Have the pupils acquired any extraordinary amount of information from their teachers? I boldly answer in the negative. Have any additions been made to the institution which belong to it, and would be, thereby, the property of the country, to pass into the hands of the future teachers of the school? I say not." \* \* \* \* \*

" I hesitate not to assert, and will maintain my position in and out of this House, that every unfair means have been had recourse to, to quash the new school. I fear not to pledge myself, that the new school harbors no ill will against its senior—and as for myself, I should be the last to pull it down; no, sir, I wish it to be useful, to flourish, and to be an honor to this city and country, but I want it to stand on its own merits, and not to be bolstered up by fictitious aid in the form of an appropriation from this House. But if it is deemed necessary to give it support, in common justice do as much for the other—put them upon equal grounds, and let each prosper according to its deserts; and I promise solemnly, that not one farthing will the *new school* put into their own pockets—they will give a *faithful, a detailed account* of every shilling. Whatever sum they may receive of the public money will go for the use of materials, books, &c. &c., which will not be the *private property* of the possessors, but will be placed in their rooms, for *their successors*, whoever they may be; it will be *public property.*" \* \* \* \* \*

" For my part, I promise, and shall be more faithful to my pledge than the hon. Attorney General has been to his, that I will again oppose a grant to the M'Gill College, if a similar amount be not ceded to the other, the more thriving and more deserving institution, as it is more zealous and more industrious. On this, as on all other occasions, I shall not fail to oppose monopoly, tyranny, and injustice."

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*A Shower of Maggots.*—The following is communicated to the Western Journal of Med. and Surg., by M. H. Fee, M.D., of Leatherwood, Ia.

" A strange phenomenon occurred in this town on the 18th inst., in the form of insects, commonly called 'skippers,' falling from a cloud accompanied by rain. The truth of the thing can be substantiated by at least six persons in the vicinity of my residence, whose attention was called to the circumstance by myself. The cloud arose in the west about 1 o'clock, P.M. The general course of Leatherwood creek at this place, and for a mile or two below, is west, so that the cloud in approaching the town touched many parts of the creek. A few minutes before the rain commenced falling here, I heard the noise of a water spout, or what Dr. Lardner terms, I believe, 'partial attraction,' about two miles below this, in the direction of the general course of the creek. The character of the noise, I cannot describe; all I can say is it was a *peculiar* noise, differing entirely from the sound of wind at a distance, or of murmuring thunder. I may very appropriately say of it, what Dr. Laeunec says of the peculiarity of sounds in the thorax, in auscultation, 'known only to the practised ear.' Now, the only reasonable conclusion I can come to with regard to the manner in which these insects got their elevation in the air, is, that the 'water spout' in its course up the creek, had passed over some stag-

nant ponds, or puddles, in which the dead carcass of some animal had been lying partially covered by water for perhaps months, or at least for such a length of time as was necessary for the generation of maggots, which were drawn up with the surrounding water.

"The appearance of the maggots corresponded in every particular with that of the 'skipper' found in bacon. They varied in length from one-eighth to one-third of an inch; were blunt at the hinder end, sharp at the head, and covered, as far back as the head extended, with short, black, bristly hair. After the shower was over and the sun came out, the heat caused them to double themselves and skip about from place to place, in search of shade."

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*Influence of Climate on Scrofula.*—The belief that one climate is more favorable to life than another is universal, and is no doubt well founded, although no one has demonstrated (or, we believe, can demonstrate) the fact numerically. The salubrity of climate is relative. The adaptability of constitution to climate is an important element in the question. The Hindoo perishes prematurely in England; the European sickens or dies prematurely in India. Mr. Phillips can make out no facts which show that light, electricity, humidity of atmosphere, or temperature, have any influence on the development of scrofula.

"When considering the prevalence of the disease, it was shown that we have no proof that climate, whether the temperature be high or low, variable or uniform, or the atmosphere be dry or humid, has any very obvious influence of itself, in producing or preventing scrofula. At St. Petersburg, with a mean temperature of 3.23, and a general mortality of 3.770; and Moscow, with a mean temperature of 3.6, and a general mortality of 4.010; and Iceland, where the Centigrade thermometer in winter indicates 20 minus—there appears to be less scrofula than at Lisbon, with its temperature of 71.2, or than at Amsterdam, Berlin, or Calcutta. So at Madeira, with its high mean temperature and low range, there is as much scrofula as among the juvenile convicts in Parkhurst prison. Other causes than climate must, then, in all these countries, exercise a most important influence in producing the disease; and among the causes of scrofula, we have seen that [innutritious] food holds the first place."—*British and Foreign Med. Review.*

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*The Production after Death of certain Characters belonging to Burns made during Life.*—MM. Leuret and Champouillon show that vesications, and even the red line surrounding them, supposed by Christison to be characteristic of their production during life, may be also made to occur in the dead body; and—

"The only sign by which, according to M. Champouillon, we may recognize whether they are produced before or after death, is the appearance presented by the skin when the epidermis is raised from them. When produced after death, the dermis is of a dull white, its surface is viscid, and there is a complete absence of sanguineous injection. When, on the contrary, they are the result of burns made during life, the dermis presents a high degree of inflammatory coloration, which the application of cooling mixtures does not remove."—*London Lancet.*

**Medical Miscellany.**—One thousand and ninety deaths occurred in New York from the 27th of June to the 24th of July.—A Dr. Roberts, a stranger, is under arrest at Fort Gaines, accused of being concerned in a great robbery in Georgia.—In New York, a new publication has been started, called the *Medical Adviser and Classic Mirror*.—Dr. Newman's *Illustrated Botany* might sell well in Boston, now being printed at New York, in Nos.—Last year the Jefferson Med. College had 409 students, and graduated 116 of them. The circular for 1846 and 7 shows that the institution is increasing in its resources and power.—Dr. Dixon, of New York, will soon have a work of 300 pages ready, entitled "Woman, and her Diseases, from the Cradle to the Grave."—Dr. Silas M. Houghton has been appointed Professor of Mineralogy and Geology in the University of Michigan, in the chair vacated by the death of the late lamented Dr. Douglass Houghton, who was drowned on Lake Superior.—It is stated in the *Bunker Hill Aurora*, that James Oliver, of South Reading, a few miles from Boston, on the 7th inst. was reported to have ejected from his stomach a living snake, one foot and four inches long, which he probably swallowed, says that paper, some years ago. Mr. Oliver has been subject to fits. Dr. Willis, of that town, intends furnishing a full report for this Journal.—The cholera made its appearance at Aden, in Arabia, in May, and 400 persons fell by it in a few days. It was advancing at the last accounts towards Yemen. Moca, Sidda and Jambo, and the whole coast of the Red Sea, are exposed to its dreadful ravages.—Dr. J. G. Russell, of Oakland, Michigan, lost his wife recently. The body was disinterred, and Prof. Douglass detected arsenic in the stomach by four different tests, whereupon the husband was arrested.—As usual at this season, the vomito is sweeping off the people, at an alarming rate, at *Vera Cruz*.—A child, 3 years of age, died in Western New York, in consequence of eating phosphorus matches—making the third death from this cause within a few months.—The number of deaths in Boston last week was the largest which ever took place in this city.—Dr. Lallent, a French physician, who attended *Ibrahim Pacha* in South France, received £6000 sterling for his services.

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**To CORRESPONDENTS.**—Dr. Holt's "Chronic Case treated Homoeopathically" has been received.

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**MARRIED.**—At Ipswich, Mass., Isaac Flitner, M.D., to Miss Clementine Stanwood, of Ipswich.—Chester Cowles, M.D., of Iowa, to Miss M. W. Howe, of Enfield, Mass.—At Lock's Mills, Me., Dr. David W. Davis to Miss Mary J. Gilman, of Eaton, N. H.

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**DIED.**—In Wardboro', Vt., Paul Wheeler, M.D., 75, a native of Rutland Mass.—At Sea, on board the ship *Versailles*, on the passage from Havre to Boston, Dr. Joseph Marchant.—In Medfield, Mass., Dr. James Hewins, 64.—At Lawrenceville, Va., Dr. N. V. Bailey, thrown from a buggy and instantly killed.—In New York, Dr. Hugh McLean, 69.

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**Report of Deaths in Boston**—for the week ending Aug. 15th, 101.—Males, 43, females, 58.—Stillborn, 10. Of consumption, 7—disease of the bowels, 29—cholera infantum, 10—diarrhoea, 2—dysentery, 4—infantile, 5—dropsy on the brain, 6—teething, 2—measles, 1—old age, 3—inflammation of the bowels, 1—marasmus, 2—drowned, 1—typhus fever, 3—dropsy, 2—apoplexy, 1—disease of the liver, 1—croup, 1—hooping cough, 1—abscess, 1—scarlet fever, 1—suicide, 1—child-bed, 2—lung fever, 1—debility, 1—accidental, 1.

Under 5 years, 64—between 5 and 20 years, 5—between 20 and 40 years, 16—between 40 and 60 years, 8—over 60 years, 8.

*French Rewards to Medical Men.*—The Royal Academy of Sciences, Paris, have just awarded to M. Amussat, their first prize in medicine and surgery, of £60, for his researches on wounds of the vascular system. Dr. Bonnet, of Lyons, received the second prize, of the value of £50, for his investigations on diseased joints. Prizes of £25 each were also awarded to Dr. Becquerel and Dr. Rodier, as an encouragement for their researches on the composition of the blood in health and in disease. A sum of £20 was awarded to M. Réveillé Parise, for his remarks on the dressing of wounds with thin plates of lead. M. Morel received £20 for his memoir on dislocations of the clavicle, and M. Clias also obtained the sum of £20 for his new method of gymnastics. The gold medal, value £35, was presented to the celebrated ichthyologist, M. Agassiz, for his valuable work on living and fossil fishes. Other prizes were awarded to Messrs. Bischoff and Raciborski for their respective treatises. Thus upwards of £250 have been presented by this Academy to medical men, for the encouragement of their efforts in art and science. How true the saying—"These things are managed better in France" than in England! —*London Lancet.*

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BOYLSTON MEDICAL PRIZE QUESTIONS.

The Boylston Medical Committee, appointed by the Corporation of Harvard University, consists of the following Physicians:—

JOHN C. WARREN, M.D.	ENOCH HALE, M.D.	SOLOMON D. TOWNSEND, M.D.
GEORGE C. SHATTUCK, M.D.	EDWARD REYNOLDS, M.D.	JOHN B. S. JACKSON, M.D.
WALTER CHANNING, M.D.	JOHN JEFFRIES, M.D.	OLIVER W. HOLMES, M.D.

At the Annual Meeting of the Committee, on Wednesday, Aug. 5th, 1846, a Premium of Sixty Dollars, or a Gold Medal of that value, was awarded to SAMUEL KNERLAND, Jr., M.D., of Boston, for the best dissertation on the following question:—"The use of Water for the prevention and cure of Diseases."

The other Boylston Premium of the same value was awarded to HENRY GRAFTON CLARK, M.D., of Boston, for the best dissertation upon "The Nature and Treatment of Diseases of the Rectum."

The Questions for 1847 are—

1st. What are the changes in human Urine which are produced by disease, and what are the most convenient methods of detecting the new products consequent thereon? The dissertation to be accompanied with the model of a simple and cheap apparatus for testing the most essential qualities of the urine, with rules for its use and the price at which it will be furnished.

2d. Is there any safe and certain operation for accomplishing the cure of common reducible inguinal hernia?

Dissertations on these subjects must be transmitted, post paid, to JOHN C. WARREN, M.D., Boston, on or before the first Wednesday of April, 1847.

The following Questions are proposed for 1848:—

1st. What is the nature and best mode of treatment of that affection of the eyes commonly called Morbid Sensibility of the Retina?

2d. What is the value of the Microscope in elucidating pathological changes in the human body?

Dissertations on these subjects must be transmitted as above, on or before the first Wednesday of April, 1848.

The author of the best dissertation on either of the above questions will be entitled to a premium of Sixty Dollars, or a Gold Medal of that value, at his option.

Each dissertation must be accompanied by a sealed packet, on which shall be written some device or sentence, and within shall be enclosed the author's name and residence. The same device or sentence is to be written on the dissertation to which the packet is attached.

All unsuccessful dissertations are deposited with the Secretary, from whom they may be obtained, with the sealed packet unopened, if called for within one year after they have been received.

By an order adopted in 1826, the Secretary was directed to publish annually the following votes, viz.:—

1st. That the Board do not consider themselves as approving the doctrines contained in any of the dissertations to which the premiums may be adjudged.

2d. That in case of the publication of a successful dissertation, the author be considered as bound to print the above vote in connection therewith.

Boston, Aug. 8, 1846.

A 19—St.

OLIVER W. HOLMES, Secretary.

DR. URE'S CHEMICAL SALT.

For the immediate production of artificial sea water, just received by the subscribers. It may be used by families or invalids in the form of the shower, or other bath, with but little trouble or expense. Dr. Hayes, the well known chemist, is acquainted with the processes for manufacturing this salt, and testifies that it will ensure a pure preparation of sea water.

July 29—1f

REDDING & CO., 8 State St.

DR. REVERE'S MODEL SHOWER BATH.

UNRIVALLED for neatness, convenience, and portability, may be obtained of BREWER, 38 Court St. Price only \$8.00.

July 29—1f